



# CRAVEN COMBINED SANITARY DISTRICT.

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## Fifty-Ninth Annual Report of the Medical Officer of Health for the year 1938.

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*To the Chairman and Members of the District Council.*

GENTLEMEN,

I beg to lay before you my Report on the health and sanitary condition of the Combined District for the year ending 31st December, 1938.

In it are summarised statistics and details which are given at greater length in the separate reports issued in connection with the respective Urban and Rural Sanitary Authorities.

The reports are drawn up on the lines suggested in the Ministry of Health Circular 1728 and, in accordance with the economic cuts recommended by both Central Authority and District Councils, condensation and cross-reference to previous reports are practised as much as possible, all that is required being limited to a record of alterations, improvements or developments which have taken place during the year.

### A.—STATISTICS AND SOCIAL CONDITIONS.

As a result of the County Review of Districts, three Urban Districts—Oakworth, Haworth and Oxenhope—have been detached from Craven and added to Keighley Borough, while Keighley Rural District no longer exists as such. Half of this rural district (East and West Morton) has been added to Keighley Borough and the other half (Steeton-with-Eastburn and Sutton) has become part of Skipton Rural District.

The new Craven Combined District has still an area of approximately 358,000 acres, or fully one-fifth of the West Riding administrative county. It has a population of approximately 58,000 and consists of two Urban Districts numbering 17,800 and three Rural Districts of 40,200.

In the industrial areas trade and employment for a great part of the year continued fairly good until increasing international unrest told heavily against trade in textiles without equivalent improvement in engineering and re-armament work.

#### VITAL STATISTICS.

Birth-rate : 12·4.

Compared with 12·2, 11·7, 12·7, 12·5 and 12·1 in the previous five years.

Death-rate : 13·54.

Compared with 13·1, 13·1, 12·1, 13·6 and 15·1 in the previous five years.

Infant Mortality : 34 per 1,000 children born.

Compared with 56, 46, 43, 49 and 53 in the previous five years, and with 53 for England and Wales.

A comparison of the several Authorities may be seen from the following table :—

Districts.	Estimated Population.	Births.	Birth Rate.	Deaths.	Death Rate.	Infant Mortality
Sedbergh .....	3895	38	9·75	48	12·33	105
Settle.....	13776	186	13·50	183	13·28	26
Skipton .....	22490	274	12·18	331	14·71	43
Total: Rural ...	40161	498	12·40	562	13·99	42
Skipton .....	12830	168	13·00	152	11·84	30
Silsden .....	4954	54	10·90	71	14·33	18
Total: Urban ....	17784	222	12·48	223	12·54	27
Total (1938)...	57945	720	12·42	785	13·54	34
Total (1937)...	74927	909	12·13	1138	15·18	53
Total (1936)...	75357	944	12·52	1027	13·62	49
Total (1935)...	75524	962	12·73	921	12·19	43
Total (1934)...	75363	884	11·74	1002	13·09	45
Total (1933)...	75146	924	12·29	988	13·14	56

Although there are individual exceptions, it will be seen, compared with the past few years, that the record for the Combined Craven District is fairly satisfactory. The Birth-rate is low and stationary, the Death-rate below the average of the past five years and the infant mortality is not merely the lowest recorded in Craven but considerably below that for England and Wales.

Comparing Rural and Urban Authorities, it will be noted that the Birth-rate of both Rural and Urban Districts continues low, while the Death-rate is higher in the Rural than in the Urban Districts.

Thus with an Infant Mortality for the whole of Craven of 34, the record compares favourably with 53 for England and Wales, 57 for the Great Towns and 51 for towns with a population between 20,000 and 50,000.

#### STILL BIRTHS.

As noted in previous reports, the percentage of Still-Births to total births varies considerably in the several districts.

Rural : Skipton 6·0, Settle 5·2, Sedbergh ·0. Total 4·5 per cent.

Urban : Skipton 2·9, Silsden 5·2. Total 3·4 per cent.

#### MATERNAL MORTALITY.

A comparison of the mortality rates in child-birth between Rural and Urban Districts in Craven and those for England and Wales is by no means favourable. Thus the maternal death-rate per 1,000 live births in Craven Rural was 4·0, in Craven Urban 9·0, in England and Wales 3·0. Although for the Combined Districts the rate was 5·5, still the rates varied from ·00 in Sedbergh, 3·6 in Skipton Rural, 5·3 in Settle, and 5·9 in Skipton Urban to 18·3 in Silsden.

## B.—GENERAL PROVISION OF HEALTH SERVICES.

### 1.—PUBLIC HEALTH OFFICERS.

Medical Officer of Health : Wm. Scatterty, M.A., M.D., C.M., D.P.H.

Sanitary Inspectors : Sedbergh—W. Batty, M.S.I.A.

Settle—F. Foxcroft, M.S.I.A., and N. Firth, M.S.I.A.

Skipton Rural—T. F. Ayrton, M.S.I.A., and R. R. Overend, M.S.I.A.

Silsden—J. W. Thornton, M.S.I.A.

Skipton—F. Holmes, M.S.I.A.

Other Officers : Services such as Tuberculosis, V.D., Maternity and Child Welfare, Veterinary Surgeons, Midwives, School Nurses, Health Visitors, etc., are controlled and staffed by the West Riding County Council.

### 2.—HOSPITALS.

- |                                  |                    |
|----------------------------------|--------------------|
| (a) GENERAL MEDICAL AND SURGICAL | } See 1934 Report. |
| (b) INFECTIOUS DISEASES          |                    |

The small hospital at Sedbergh has been so little used for years that negotiations were completed between the Rural District Council and the Settle Council for cases of infectious disease in Sedbergh Rural District to be admitted into Austwick Fever Hospital.

#### (c) TUBERCULOSIS.

Sanatoria are provided by the West Riding County Council, principally at Middleton, Ilkley, for men ; Scotton Bank, Knaresborough, for women and children, and Eldwick, Bingley, for children. Since the opening of Scotton Bank, provision for cases of Tuberculosis at Morton Banks is no longer available. Similarly, at the end of the year arrangements were made for the closure of Eldwick Sanatorium and transference of the children to Scotton Bank.

#### (d) WELFARE CENTRES, MATERNITY HOMES, &c.

ANTI-NATAL CLINICS.—Established at Grassington, Skipton and Settle, also a clinic for Toddlers at Skipton : attended by Medical Officer paid by the County Council.

Additional anti-natal services provided by the County include Home Visiting by Health Visitors, Home Helps, Supervision by doctor or midwife, and expert consultations at certain anti-natal clinics.

Extra nourishment, dental treatment, etc.

MATERNITY HOMES.—The County Council arrange for the admission of in-lying cases to St. John's Hospital, Keighley, and the District Hospital, Skipton, expenses being largely paid by the County. As evidence of the use made of these Homes for in-lying cases, it may be stated that over 50 mothers were admitted to the Keighley Institution and over 130 to Skipton Hospital last year.

Provision for the treatment of Puerperal Pyrexia is similarly made at Keighley, Bingley and Shipley Joint Hospital, and at Skipton Infectious Diseases Hospital.

CHILD WELFARE CENTRES.—Under the auspices of the County Council centres are established in places—Silsden, Glusburn, Grassington, Skipton, Settle, Ingleton. Voluntary centres are also open in Glusburn, Bentham, etc.

NURSING ASSOCIATIONS.—Grants in aid by the County Council have been discontinued since the establishment of the domiciliary midwifery service mentioned above.



## C.—SANITARY CIRCUMSTANCES IN THE AREA.

### (a) WATER SUPPLIES.

In Craven, Spring as a variation was comparatively dry and Autumn wet, so that the need for increased storage referred to in previous reports was not felt in certain districts. Still the future is such an uncertain quantity that the emergency provisions then recommended hold good.

During the year in the Rural Areas a great deal of work was done by the County Council and your district officials in sampling and supervising water supplies and gathering grounds.

Of 60 samples examined by the W.R. County Bacteriologist, 14 were reported to be satisfactory, 7 doubtful and 39 unsatisfactory. In practically every instance the chemical analysis was good, but samples showing the presence of faecal organisms (*Bacillus Coli*) were considered unsatisfactory. It does not necessarily follow that such waters were "bad" and unfit for human consumption, but they did not comply with the standard of purity set up by the Ministry of Health, and consequently investigation and supervision was necessary.

The analyses suggest a departure in investigating the sources of contamination: the farther the gathering grounds are from centres of population the more unsatisfactory the result, i.e., the greater the evidence of pollution. Such a conclusion is opposed to all experience if the pollution be of human origin. For instance, in Skipton Rural there is one person to 7·9 acres, in Sedbergh 13·4, and in Settle 18·9, yet the proportion of unsatisfactory samples is much lower in Skipton Rural than in the other two districts. Again, the analyses for townships in Skipton Rural—Glusburn, Cowling, Kildwick, Grassington—were better than for such outlying places as Buckden, Kettlewell and Draughton. Similarly, in Settle Rural the supplies for Settle and Giggleswick were satisfactory, but not those for Horton-in-Ribblesdale and Ingleton. In Sedbergh the town's supply was best, Dent less satisfactory, and Garsdale least.

A natural inference is that the *Bacillus Coli* upon which the unsatisfactory analyses rest must be of animal and not of human origin, and consequently that the analyses may not be so serious as at first appears. It should be remembered that *Bacillus Coli* of animal origin (birds, sheep, cattle) do not induce specific or communicable disease in human beings, and that water with a high bacterial count is no more likely to be contaminated by a human typhoid carrier than water with a low bacterial count. Moorland waters contain much organic matter in which bacteria multiply rapidly and these moorland gathering grounds are most readily contaminated with the *Bacillus Coli* of sheep and wild fowl.

A knowledge of local conditions therefore suggests the query that if waters issuing from the bowels of Penyghent, Whernside and Ingleborough are unsatisfactory according to the standard recommended by the Ministry of Health, where are there gathering grounds more remote from likelihood of human pollution and where is there a healthier population than the lonely dwellers in those areas?

Such theorising, however, must not induce indifference and unwarranted confidence. Systematic inspection of the gathering grounds is called for, combined with filtration and chlorination where possible and unpreventable sources of pollution are suspected or found.

Chlorination, etc., of small supplies, such as many under consideration are, may be prohibitive owing to initial and recurring costs of maintenance. Boiling may be ideal if carried out, but so long as any doubt exists as to the purity of a water supply unrelenting supervision must be practised.

Warning against the continued use of drinking supplies liable to pollution should not require annual repetition. Surface contamination by manuring, building extensions, overflowing sumps and defective drainage may for long periods produce only gastric disturbance with slightly impaired health without causing serious epidemic disease, but one never knows when highly infectious germs may be introduced to even the purest supply, and serious results follow lack of effective supervision.

## (b) RIVERS AND STREAMS.

In former reports, attention was drawn to the frequency with which drains and sumps were allowed to discharge into running water, and while some townships, e.g., Bradley, were moving, others, e.g., Horton-in-Ribblesdale and Stanbury, were content to mark time. They get rid of their liquid refuse, and if places lower down the stream do not too loudly complain, why not simply carry on as did their fathers before them! Thus the golden rule is completely overlooked.

## (c) CLOSET ACCOMMODATION, SEWERAGE, &amp;c.

It is mere repetition to report that activity is shown in certain districts in dealing with closet contents, etc. Conversion of old-fashioned tub-closets and middens to water-carriage proceeds in villages, but in the more rural areas the difficulties of sewage disposal seem more or less insurmountable. This aspect is understandable, and may even appear excusable so long as water supplies are not contaminated, but where others are liable to suffer only the best-known practicable means of disposal should be tolerated.

## (d) SANITARY INSPECTION OF DISTRICTS.

Classified statements of inspections, defects found and remedied, etc., are given by the Sanitary Inspectors in their respective District Reports.

**D.—HOUSING.**

The results of the Overcrowding Survey under the Housing Act, 1935, has already been laid before the respective Authorities, and the cleaning-up process has continued to occupy your attention during the current year. You will remember that special attention had to be given to bedroom accommodation and the provision of separate rooms for the sexes above a certain age. Unfortunately the number of persons permitted in any given house is determined by the number of rooms, and to a less extent by the ages of the occupants, and seeing the living room (kitchen) is counted as a room, there may be and often is overcrowding in a moral and hygienic sense, though not from the legal point of view. Evidence of building activity may be gathered from the fact that during 1938 the following new houses were erected: Silsden 15, Skipton Urban 112, Sedbergh 9, Settle 29, Skipton Rural 78.

Reference to the position in the several Districts and to the re-housing activities may be found in the District Reports.

**E.—INSPECTION AND SUPERVISION OF FOOD.**

## (a) MILK.

In former reports your attention was drawn to the unpleasant fact that there was a larger proportion of tuberculous cows in Urban than in Rural Districts and to the further, though less evident fact, that milk produced in the Urban areas was bacteriologically less clean and therefore less wholesome than that produced in Rural. While Medical Officers all over the country are recommending a larger consumption of milk, it would strengthen their appeal if Rural producers put pressure on their Urban competitors to start a healthy rivalry in wholesome milk production.

Adulteration by water or colouring matter comes within the sphere of the County Council, but cleanliness of supply and freedom from Tubercle Bacilli are dealt with by the Sanitary Authority. With regard to both these factors improvement is steadily progressive. Details of action taken to secure improvement are given in the District Reports. It may, however, be noted that of 40 samples of milk supplied to schools and bacteriologically examined, 36 were found satisfactory and 4 unsatisfactory. Of 14 samples of Accredited milk only 50 per cent were satisfactory. Inefficient pasteurisation, as carried out by certain farms is tending to bring discredit upon a recognised method of protecting milk supplies. It is not claimed that pasteurisation will convert dirty milk into clean or wholesome milk, but it will kill disease-producing germs when efficiently performed. 26 new licences for Accredited milk were issued during the year.

## (b) MEAT—SLAUGHTERHOUSES.

Under this heading one need only remind you that there are more than 100 Slaughterhouses scattered over the 550 square miles in the Combined District, and these have to be inspected on slaughtering days by seven Inspectors with other equally important duties to fulfil. In spite, however, of the physical difficulties due to distance, transport and simultaneous slaughtering in different areas, one can say generally that the efforts made to ensure a wholesome meat supply are wonderfully efficient.

## F.—PREVALENCE AND CONTROL OF INFECTIOUS DISEASE.

## (1) NON-NOTIFIABLE DISEASE.

INFLUENZA.—Prevalence slight compared with 1937. Total deaths from this cause 5, compared with 38 in the previous year.

CHICKEN POX.—School authorities reported 53 cases in Gargrave School and 8 in Grassington.

WHOOPIING COUGH.—Glusburn (32 cases), Eastburn, Silsden, Salterforth, Embsay and Water Street (Skipton Urban) Schools all invaded.

## (2) NOTIFIABLE INFECTIOUS DISEASE.

## (a) INCIDENCE.

The following notifiable diseases (positive and suspected) were brought to the notice of the several Authorities during 1938 :—

District.	Scarlet Fever.	Diph- theria.	Typhoid and Para- typhoid.	Pneu- monia.	Puer- peral Pyrexia.	Cerebro- Spinal Fever and Polio En- cephalitis.	Erysi- pelas.	Oph- thalmia.	Total.
URBAN :									
Silsden ...	18	2	—	—	—	—	1	—	21
Skipton ...	6	14	—	2	1	—	5	—	28
RURAL :									
Sedbergh ...	1	—	—	1	—	—	—	—	2
Settle ...	38	2	—	7	—	—	1	—	48
Skipton ...	25	53	—	12	3	—	5	—	98
Total ...	88	71	—	22	4	—	12	—	197

The number of infectious diseases notified was greater than in the previous year, largely due to an epidemic of Diphtheria in Skipton Rural, where 53 cases were notified compared with 5 in 1937.

Death-rate from notifiable infectious disease = .08, compared with .14 in the previous year.



## (b) CONTROL.

The extent to which the several authorities availed themselves of their isolation hospital facilities is shown below (cases admitted for observation included)—

Hospital.	District.	Scarlet Fever.	Diphtheria.	Other.	Total.
Sedbergh .....	Sedbergh	—	1	3	4
Settle.....	Settle	37	2	7	46
Skipton Joint :					
	Skipton U.	6	14	4	11
	Skipton R.	18	46	2	66
	Silsden	19	2	1	22

## (c) ZYMOTIC DEATHS.

The seven zymotic diseases, Small Pox, Measles, Scarlet Fever, Diphtheria, Enteric Fever, Whooping Cough and Diarrhoea were registered as the causes of 11 deaths, viz., Measles 1, Scarlet Fever 2, Diphtheria 4, Diarrhoea in children under two years 4, compared with 23, 8, 10, 17 and 11 in the previous five years.

Zymotic Death-rate—·19, compared with ·13, ·22 and ·14 in the previous three years.

## (3) TUBERCULOSIS.

## (a) INCIDENCE.

Sex.	Cases on Register on January 1st, 1938.		New Cases Notified or otherwise ascertained.		Cases removed from Register.		Cases on Register on 31st Dec., 1938.	
	Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.	Pul.	Non-Pul.
Males	96	31	17	7	29	11	84	27
Females	78	14	17	5	38	4	57	15
	174	45	34	12	67	15	141	42

## (b) AGE.

Age Period.	New Cases Notified.				Deaths.			
	Pulmonary.		Non-Pul.		Pulmonary.		Non-Pul.	
	M	F	M	F	M	F	M	F
0—1 ...	—	—	—	—	—	—	—	—
1—5 ...	—	—	1	—	—	—	—	—
5—10 ...	—	—	1	2	—	—	—	1
10—20 ...	1	4	1	—	—	2	—	2
20—25 ...	2	2	1	—	—	1	—	—
25—35 ...	5	5	1	3	2	2	—	1
35—45 ...	5	3	—	—	3	1	—	—
45—55 ...	3	2	1	—	—	1	—	—
55—65 ...	1	1	—	—	1	1	—	—
65 and upwards	—	—	1	—	—	—	—	—
Totals ...	17	17	7	5	6	8	—	4

## (c) CONTROL.

In addition to the routine methods followed by District Inspectors and Nurses in advising patients and relatives of the danger of infection, the benefit of fresh air and free ventilation, etc., efforts are made to secure sanatorium treatment for early cases and hospital isolation for those whose home conditions are unsuitable for home life. Of the 46 cases notified during the year, 27 were sent to sanatoria for as long as they would consent to stay. This does not include some 24 cases notified and admitted in previous years who still were in sanatoria in hope of permanent cure or because of the unsatisfactory environment of their homes.

## (d) MORTALITY.

Deaths : Pulmonary—6 males, 8 females—14. Death-rate ·24.

Non-pulmonary—0 males, 4 females—4. Death-rate ·07.

Total death-rate from all forms of Tuberculosis, ·31.

No action was taken under the P.H. (Prevention of Tuberculosis) Regulations, 1925, relating to tuberculous employees in the milk trade, nor under the P.H. Act, 1925, Art. 62, which empowers certain cases of Tuberculosis to be compulsorily removed to hospital.

## BACTERIOLOGICAL EXAMINATION.

The County Bacteriologist reports the following pathological specimens received at the Laboratory, Wakefield, during 1938 :—



District.	Sputum and Urine for Tubercle Bacilli.	Throat Swabs for Diphtheria.	Blood and Urine for Enteric Fever.	Water for Bacteriologi- cal Examination	Mis- cellaneous.	MILK.	
						Bacterial Content.	Tubercle Bacilli.
Silsden    „    ...	6	7	—	—	1	—	—
Skipton    „    ...	20	104	—	5	70	—	—
Sedbergh   „    ...	16	5	—	—	16	—	—
Settle    „    ...	32	17	—	1	37	—	—
Skipton    „    ...	29	74	2	24	29	12	12
	103	207	2	30	153	12	12

Further details of administration work and sanitary conditions applicable to your several Districts may be found in the Annual Reports issued to the respective constituent Authorities in the Combined District.

I am,

Your obedient servant,

WILL SCATTERTY, M.A., M.D., C.M., D.P.H.,

Medical Officer of Health.

KEIGHLEY,

May, 1939.

# COMPARATIVE TABLE.

BIRTH-RATE, DEATH-RATE ANALYSIS OF MORTALITY, ETC., IN 1938.

	England and Wales.	126 County Boroughs and Great Towns including London.	148 Smaller Towns (Resident Populations 25,000 to 50,000 at 1931 Census)	Craven Combined District.
Rates per 1,000 Population.				
BIRTHS :				
Live ... ..	15.1	15.0	15.4	12.4
Still ... ..	0.60	0.65	0.60	0.55
DEATHS :				
All Causes ... ..	11.6	11.7	11.0	12.9
Typhoid and Paratyphoid				
Fevers ... ..	0.00	0.00	0.00	0.00
Smallpox ... ..	0.00	—	0.00	0.00
Measles ... ..	0.04	0.05	0.03	0.01
Scarlet Fever ... ..	0.01	0.01	0.01	0.02
Whooping Cough ... ..	0.03	0.03	0.02	0.00
Diphtheria ... ..	0.07	0.07	0.06	0.06
Influenza ... ..	0.11	0.10	0.11	0.06
NOTIFICATIONS :				
Smallpox ... ..	0.00	0.00	0.00	0.00
Scarlet Fever ... ..	2.41	2.60	2.58	1.51
Diphtheria ... ..	1.58	1.85	1.53	1.22
Enteric Fever ... ..	0.03	0.03	0.04	0.00
Erysipelas ... ..	0.40	0.46	0.39	0.20
Pneumonia ... ..	1.10	1.28	0.98	0.37
Rates per 1,000 Live Births.				
Deaths under 1 year of age ...	53	57	51	34
Deaths from Diarrhoea and Enteritis under 2 years of age.	5.5	7.8	3.6	5.5
MATERNAL MORTALITY :				
Puerperal Sepsis ... ..	0.89	} Not available		1.4
Others ... ..	2.19			4.1
Total ... ..	3.08			5.5
Rates per 1,000 Total Births (i.e. Live and Still).				
MATERNAL MORTALITY :				
Puerperal Sepsis ... ..	0.86	} Not available		1.3
Others ... ..	2.11			3.9
Total ... ..	3.97			5.3
NOTIFICATIONS :				
Puerperal Fever ... ..	14.42	18.08	12.51	5.3
Puerperal Pyrexia ... ..				



**CRAVEN**

**Combined Sanitary District.**

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# **Annual Report**

OF THE

**Medical Officer of Health**

FOR

**1938.**

KEIGHLEY, MAY, 1939.

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THE CRAVEN HERALD LTD., SKIPTON